Personal Assistance Oversight Minutes Wednesday, March 20, 2019 1:00 – 3:00 (MDT) 12:00 -2:00 (PDT)

AGENDA ITEMS	LEAD	DECISION / ACTION ITEMS
Welcome and Roll Call	Alexandra Fernández Bureau Chief	 Notes: Members participating via phone: Kevin Thorson, Marcy Hayman, Linda Weisse, Mitzi Lewis, Amber Davis, Mickie Palmer Members participating via video: Melanie Belnap, BLTC Operations Program Manager Members attending at the Elder location: Pam Ziegenfuss and Sharon Anitok Medicaid Staff at the Elder location: Ali Fernández, Marcie Young, Tammy Ray, Alex Childers-Scott, Katie Davis, Jennifer Pinkerton Members excused: Jacob Massey, Dana Gover, Jan Carpenter
OLD BUSINESS		
Read, Review and Approve DRAFT Minutes from September 19, 2018	Alexandra Fernández Bureau Chief	 Notes: Motion to approve the DRAFT Minutes from the September 19, 2018 meeting was made by Sharon Anitok and seconded by Pam Ziegenfuss Approved minutes from the September 19, 2018 meeting will be posted on the H&W Website at PAO Minutes September 19, 2018
PLANNING		
PAO Committee Composition	Alexandra Fernández Bureau Chief	Notes: We have received a nomination for Provider Eastern HUB: Amber Davis — Care Connections of Idaho (Amber was unable to attend in December — her nomination was held to March) Sharon Anitok made the motion to accept Amber Davis's nomination. Linda Weiss seconded the motion. We received a nomination from Jan Carpenter, Participant Central HUB (term expired 9/6/2018) Sharon Anitok made the motion to accept Jan Carpenter's nomination. Linda Weiss seconded the motion In the month of March, we have 2 members with terms expiring: (1) Participant North HUB — Kevin Thorson and (1) Agency Central HUB — Sharon Anitok. We received a nomination form from Kevin Thorson — Participant North HUB (term will expire 3/31/2019). Linda Weiss made the motion to accept Kevin Thorson's nomination. Sharon Anitok seconded the motion. We received a nomination form from Sharon Anitok — Agency Central HUB. Pam Ziegenfuss made the motion to accept Sharon Anitok's nomination. Marcy Hayman seconded the motion. We also received a nomination form from Mitzi Lewis — Agency Central HUB. Marcy Hayman made the motion to accept Mitzi Lewis's nomination. Sharon Anitok and Linda Weiss seconded the motion.

		 As of March 19, 2019, with the nominations listed above we still have the following vacancies: 1) Participant Statewide (Any HUB) 1) Participant from the Northern HUB 2) Participants from the Eastern HUB 1) Provider from the Central HUB 1) Provider from the Eastern HUB If you know of a person that would be interested in serving in any of these positions – Please talk to them and use the "Join Here" button on the DHW website at http://healthandwelfare.idaho.gov/Medical/Medicaid/MedicalCareAdvisoryCommittee/PersonalAssist anceOversightCommittee/tabid/1354/Default.aspx
MONITORING	T	
Quality Assurance 2018 Annual Report	Alexandra Fernández Bureau Chief	 The purpose of the Quality Assurance process, gathering and reporting data is to evaluate how providers are providing services for the Medicaid population. And to ensure that their licenses, staff trainings and background checks current. Ali pointed out some of the areas of this report that reflect the work that is done throughout the year. Page 1 – New applications for years 2016, 2017 and 2018 are showing that average 91% of applicants for the A&D Waiver are meeting the Level of Care Page 3 – Internal Audit Clinical Determinations – Auditing of Nurse Reviewers to ensure that assessments are accurate, consistent and following waiver criteria Page 4 - CFH /RALF Initial Provider Enrollment – Initial applications for CFH and RALF and RALF Licensure request reviews are conducted by the Division of Licensing and Certification (L&C) Any facility that is not compliant is not certified and a license is not issued. BLTC OA monitors the "services" to ensure that providers follow waiver criteria. Page 9 – Service Plan Elements: Participant's Risks and Goals – Auditing for adequacy of service plans for waiver participantss. Page 14 – Abuse/Neglect/ Exploitation Complaints 2018. Complaint intake is the responsibility of all available staff with in BLTC. Regional Nurse Reviewers are first responders to all complaints. After reporting to Adult Protection or Law Enforcement all complaints related to Abuse/Neglect or Exploitation are immediately forwarded to OA staff for further investigation. All reported cases in 2018 were investigated, substantiated and remediated. Also, the UAI indicator of Abuse/Neglect or Exploitation is designed to immediately notify the OA staff. If you have questions regarding this report, contact Chris Barrott, OA Manager @ chris.Barrott@dhw.idaho.gov
Idaho Home Choice Update	Tammy Ray IHC Project Manager	Notes: Idaho Home Choice Benchmark Updates 10/1/2011 through 12/31/18 Demographics for the wrap up of the MFP Grants This fact sheet was divided into 2 groups: < 65 years and 65+

Medicare Medicaid Coordinated Plan	Alexandra Fernández	 DD Waiver — 100, A&D Waiver — 416, and Enhanced Plan 54 Type of Institution — 444 Transitioned from Skilled Nursing Facilities Type of Residence — 271 Transitioned to their own apartment Region — Region 3 — 168 & Region 4 — 177 Reason Program Ended — 394 successfully completed their 365 days Average number of days that participant was institutionalized 920 Average Age Idaho — 56, Nationwide — 58 Average Days to Discharge — Idaho — 88, Nationwide — 118 Re-institutionalized Rate — Idaho 7.7%, Nationwide 11.0% Figures for Sustainability since January 1, 2019 are: We have had 50 participants in process through sustainability for 2019 We have had 18 discharges through sustainability for 2019 The MFP grant may be re-authorized until December 31, 2023 We will be able to Transition individuals through the grant as we did before We would keep the sustained piece and essentially run two separate programs for Transitioning Boise Transition Management Training is March 27, & 28, 2019 Caldwell Transition Management Training is April 8 & 9, 2019 Notes: MMCP is the "Coordinated" managed care program for Dual Eligible participants
(MMCP) Update	Bureau Chief	 Dual eligible individuals are 21 or over, receive both Medicare (Parts A, B and D), and Enhanced Medicaid coverage. There are approximately 27, 000 Duals in the state of Idaho Depending on the county that they live in, Dual's have the option of choosing between two health Plans: Blue Cross of Idaho or Molina Health Care of Idaho Both health plans are available in Ada, Bannock, Bingham, Bonner, Bonneville, Canyon, Kootenai, Nez Perce and Twin Falls Blue Cross also has MMCP available in Boise, Boundary, Cassia, Clark, Elmore, Fremont, Gem, Jefferson, Madison, Minidoka, Owyhee, Payette and Power counties We anticipate that the health plans will be communicating with CMS to expand their coverages in 2020 As of March 1, 2019, the were 4,895 MMCP Enrollees and 766 IMPlus Enrollees For additional information regarding MMCP https://healthandwelfare.idaho.gov/Medical/Medicaid/DualEligibleParticipants/tabid/2538/Default.as px

Idaho Medicaid Plus	Alexandra Fernández Bureau Chief	 Notes: Idaho Medicaid Plus (IMPlus) program is a mandatory single source managed care program for individuals eligible for both Medicare and Idaho Medicaid benefits – it manages the Idaho Medicaid benefits only under one health plan Pleased to report that Idaho Medicaid Plus (IMPlus) was launched in Twin Falls Co. in November 2018 and it went very well Goals of the Twin Falls Launch were 1) Minimize the disruption of services 2) Provide a smooth transition of services for participants and providers Additional counties are scheduled to be implanted: April 1, 2019 – Bonneville, Bingham, and Bannock June 1, 2019 Bonner, Kootenai and Nez Perce. No dates have been set for Ada and Canyon counties yet Participants receive a letter 90 day prior to rollout explaining the program and allowing them to sign
		 up for MMCP with either Blue Cross or Molina Health Care. If they do not make a choice, they will be auto assigned to one of the plans For information on IMPlus, Health Plan contact numbers, upcoming local meetings and outreach: http://healthandwelfare.idaho.gov/Medical/Medicaid/DualEligibleParticipants/tabid/2538/Default.aspx
Electronic Visit Verification (EVV) Project	Alexandra Fernández Bureau Chief	 Notes: Requirements of Electronic Visit Verification (EVV): to capture the type of service performed, the individual receiving that service, date of service, location of service delivery, individual providing the service, time the service begins and ends EVV is still very early in the developmental phase Workgroups are gathering information and comparing that to the CMS guidelines For current information regarding EVV, CMS information, requirements, surveys, upcoming meetings and presentations go to http://healthandwelfare.idaho.gov/Default.aspx?TabId=4404
RECOMMENDATION	S & OTHER UPDAT	TES TO THE PARTY OF THE PARTY O
Legislative Update	Alexandra Fernández Bureau Chief	 Notes: All three of these Medicaid Enhanced Plan Benefits Rule Changes that the Bureau of Long Term Care took to the Legislature this year PASSED. 16-310-1801 – Is to allow Idaho Medicaid to implement a phased-in mandatory Medicaid managed care program for individuals who are dually eligible for Medicare Parts A and B and Enhanced Medicaid Effective 10/1/18 16-310-1802 - Transition Management and Transition Service benefits needs to be added to the Aged and Disabled (A&D) Waiver Section as well as the Adult Developmental Disabilities (DD) Waiver Section of IDAPA. These services directly benefit waiver participants by supporting individuals who

		intermediate care facilities for individuals with intellectual disabilities, to live in community settings. The proposed rule change needs to accomplish two outcomes: a. Add two new service definitions under Sections 326 and 703; and b. Add qualifications for providers that render these services under Sections 328 and 705. Effective 7/1/19 • 16-310-1803 - Implementation of predetermined Special Rates in nursing facilities for residents receiving tracheostomy care and ventilator-dependent residents. Currently, rates for these residents are evaluated on a case-by-case basis and only begin on, or after, the date the Special Rate request is received. This change will allow predetermined rates to be readily available to providers and allow the rate to begin on the date the service is needed, regardless of the date the Special Rate request is received. The rates will include, as it does currently, equipment and non-therapy supplies and the Weighted Average Hourly Rates (WAHR) for additional Registered Nurse (RN) and Certified Nursing Assistant (CNA) care. Stakeholder input is sought regarding supplies, equipment, and RN and CNA hours to be considered in the compilation of the predetermined rate along with documentation requirements to validate the provision of ventilator or tracheostomy care. Effective 7/1/19
Assignment Update and Wrap Up	Alexandra Fernández Bureau Chief	Notes: At the June 19, 2019 meeting we will hold a discussion on the Bylaws, Attendance Requirements, RSVP and Alternates Please send any topics or agenda items that you would like discussed to Marcie.Young@DHW.idaho.gov by Wednesday, May 15, 2019
ADJOURN	T	
		Next Meeting will be on Wednesday, June 19, 2019

2019 Meeting Dates: March 20, 2019 (Video), June 19, 2019 (Video), September 25, 2019 (Video), December 18, 2019 (Video)

All meetings will be held on Wednesday from 1-3 PM (MT) and 12-2PM (PT)

Video Locations
3232 Elder Street, Boise
Region I – 1120 Ironwood Large Conference Room
Region II – SO Bldg. 1st Floor Conference Room
Region V – 601 Poleline Rd. Conference Room B
Region VI – 1070 Hiline Rd. Conference Room 390 A
Region VII – 150 Shoup Ave. Conference BH Video